

31-16-01

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PTO/SB/05 (11-00)

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01/12/01  
J-1962 U.S. PTOJ-19759487  
01/12/01

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 452202000100

First Inventor Robert KOHLER and Patrick FORD

Title SYSTEM AND METHODS FOR ENABLING PERSON TO PERSON PRODUCT TRANSFER VIA A COMMUNICATIONS NETWORK

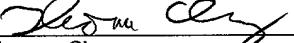
Express Mail Label No. EL530607566US

## CERTIFICATE OF MAILING BY "EXPRESS MAIL"

Express Mail Label No.: EL530607566US

Date of Deposit: January 12, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

  
Thomas Chuang

### APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1.  Fee Transmittal Form (e.g. PTO/SB/17) [Total Pages 1]  
*(Submit an original, and a duplicate for fee processing)*
2.  Applicant claims small entity status.  
See 37 CFR 1.27.
3.  Specification [Total Pages 33]  
*(preferred arrangement set forth below)*
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (*if filed*)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4.  Drawing(s) (35 USC 113) [Total Sheets 17]
5. Oath or Declaration [Total Pages 1]
  - a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR 1.63(d))  
*(for continuation/divisional with Box 17 completed)*
  - i.  **DELETION OF INVENTOR(S)**  
*Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)*
6.  Application Data Sheet. See 37 CFR 1.76 [Total Pages 2]

7.  CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
*(if applicable, all necessary)*
  - a.  Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i.  CD-ROM or CD-R (2 copies); or
    - ii.  paper
  - c.  Statements verifying identity of above copies

### ACCOMPANYING APPLICATION PARTS

9.  Assignment Papers (cover sheet & document(s))
10.  37 CFR 3.73(b) Statement  
*(where there is an assignee)*
 Power of Attorney
11.  English Translation document (if applicable)
12.  Information Disclosure Statement (IDS)/PTO-1449
  Copies of IDS Citations
13.  Preliminary Amendment
14.  Return Receipt Postcard (MPEP 503)  
*Should be specifically itemized*
15.  Certified Copy of Priority Document(s)  
*(if foreign priority is claimed)*
16.  Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17.  Other Fee Determination Record (1 page)

**18. If a CONTINUATING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.**

Continuation       Divisional       Continuation-in-part (CIP)      of prior application No. \*

Prior application information

Examiner \*

Group / Art Unit \*

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

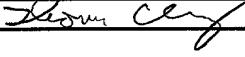
### 19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label

 <b>20872</b> <small>PATENT TRADEMARK OFFICE</small>	
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or  Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name				
Address				
City		State		Zip Code
Country		Telephone		Fax
Name (Print/Type)	Thomas Chuang		Registration No. (Attorney/Agent)	44,616
Signature			Date January 12, 2001	

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# FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision.



TOTAL AMOUNT OF PAYMENT

Complete if Known	
Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Robert KOHLER and Patrick FORD
Examiner Name	To Be Assigned
Group Art Unit	To Be Assigned
Attorney Docket No.	452202000100

(\$710.00)

## METHOD OF PAYMENT

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

- Check  Credit Card  Money Order  Other

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	<input type="checkbox"/>
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	<input type="checkbox"/>
139	130	139	130	Non-English specification	<input type="checkbox"/>
147	2,520	147	2,520	For filing a request for ex parte reexamination	<input type="checkbox"/>
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<input type="checkbox"/>
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	<input type="checkbox"/>
115	110	215	55	Extension for reply within first month	<input type="checkbox"/>
116	390	216	195	Extension for reply within second month	<input type="checkbox"/>
117	890	217	445	Extension for reply within third month	<input type="checkbox"/>
118	1,390	218	695	Extension for reply within fourth month	<input type="checkbox"/>
128	1,890	228	945	Extension for reply within fifth month	<input type="checkbox"/>
119	310	219	155	Notice of Appeal	<input type="checkbox"/>
120	310	220	155	Filing a brief in support of an appeal	<input type="checkbox"/>
121	270	221	135	Request for oral hearing	<input type="checkbox"/>
138	1,510	138	1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
140	110	240	55	Petition to revive - unavoidable	<input type="checkbox"/>
141	1,240	241	620	Petition to revive - unintentional	<input type="checkbox"/>
SUBTOTAL (1) <input type="text" value="(\$710.00)"/>					
2. EXTRA CLAIM FEES					
Total Claims	20	- 20** =	0	Extra Claims	Fee from below
Independent Claims	2	- 3** =	0	x	18
Multiple Dependent	*	*	x	=	\$
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	<input type="checkbox"/>
102	80	202	40	Independent claims in excess of 3	<input type="checkbox"/>
104	270	204	135	Multiple dependent claims, if not paid	<input type="checkbox"/>
109	80	209	40	**Reissue independent claims over original patent	<input type="checkbox"/>
110	18	210	9	**Reissue claims in excess of 20 and over original patent	<input type="checkbox"/>
SUBTOTAL (2) <input type="text" value="(\$0)"/>					
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) <input type="text" value="(\$0)"/>					

\*\* or number previously paid, if greater; For reissues, see above.

Complete (if applicable)

Name (Print/Type)	Thomas Chuang	Registration No. (Attorney/Agent)	44,616	Telephone	(415) 268-7000
Signature				Date	January 12, 2001

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PATENT APPLICATION FEE DETERMINATION RECORD		Application or Docket Number <b>452202000100</b>
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## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	20 minus 20 =	<b>0</b>
INDEPENDENT CLAIMS (37 CFR 1.16(b))	2 minus 3 =	<b>0</b>
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

\*If the different in column 1 is less than zero, enter "0" in column 2

## SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	FEES	RATE	FEES
	\$355.00	OR	
x\$9.00	\$*	OR	\$18.00
x\$40.00	\$*	OR	\$80.00
+\$135.00	\$*	OR	\$270.00
		OR	\$
TOTAL	\$*	TOTAL	\$710.00

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus		=*	
Total (37 CFR 1.16(c))		Minus			=*
Independent (37 CFR 1.16(b))		Minus			=*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				(37 CFR 1.16(d))	

## SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
x\$9.00	\$*	OR	\$18.00
x\$40.00	\$*	OR	\$80.00
+\$135.00	\$*	OR	+\$270.00
TOTAL ADDIT. FEE	\$*	TOTAL ADDIT. FEE	\$*

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus		=*	
Total (37 CFR 1.16(c))		Minus			=*
Independent (37 CFR 1.16(b))		Minus			=*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				(37 CFR 1.16(d))	

RATE	ADDI- TIONAL FEE
x\$9.00	\$*
x\$40.00	\$*
+\$135.00	\$*
TOTAL ADDIT. FEE	\$*

RATE	ADDI- TIONAL FEE
\$18.00	\$*
\$80.00	\$*
+\$270.00	\$*
TOTAL ADDIT. FEE	\$*

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus		=*	
Total (37 CFR 1.16(c))		Minus			=*
Independent (37 CFR 1.16(b))		Minus			=*
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				(37 CFR 1.16(d))	

RATE	ADDI- TIONAL FEE
x\$9.00	\$*
x\$40.00	\$*
+\$135.00	\$*
TOTAL ADDIT. FEE	\$*

RATE	ADDI- TIONAL FEE
\$18.00	\$*
\$80.00	\$*
+\$270.00	\$*
TOTAL ADDIT. FEE	\$*

\* If the entry in column 1 is less than the entry in column 3

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

Burden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.